

Section 5 Division
P.O. Box 55897
Boston, MA 02205-5897
617-351-9272 (Phone)
617-351-9399 (Fax)

Dear Repair Applicant:

A "Repairer" is defined as any person who is principally and substantially engaged in the business of repairing, altering, reconditioning, equipping, or towing motor vehicles or trailers for the public and who maintains an established place of business as defined in M.G. L. c.90, s.1, with the facilities for the repairing of such motor vehicles or trailers.

The repairer must maintain business records on the licensed premises which shall contain the date(s), description of the motor vehicle, including the vehicle identification number, owner and nature of the work.

It will be necessary for you to furnish copies of the following documents in order to obtain Repair plates:

- 1. A Business certificate from the city or town in which you are doing business.**
- 2. Corporation papers from the Secretary of State, Department of Corporations and Taxation (if applicable).**
- 3. DPU Certificate of Compliance (if towing for the Police Department).**
- 4. Federal Identification Number/Employer Identification Number (FID/EIN)* from the Department of the Treasury, Internal Revenue Service. If you currently have an FID/EIN, please enclose a copy of one of the following most common forms of proof of an FID/EIN:**

- Any pre-printed IRS correspondence that includes corporation name, address, and FID/EIN number
- Federal Tax Deposit Coupon **Form 8109**
- **Form 147C**
- Notice of New Employer Identification Number Assigned **Form 5372**
- **CP575** Notice (issued by the IRS). This is a letter sent to a customer to confirm issuance of an FID number.
- Certificate of Exemption **Form ST-2** (issued by DOR)

Note: If your business is unincorporated (e.g. a sole proprietor or general partnership), then the pre-printed IRS correspondence must list the owner information in this sequence: the individual's name, business name, and address.

- 5. Repair shop number issued by Director, Division of Standards, Office of Consumer Affairs (all repair shops that do auto body work, or glass replacements, must apply for a repair shop number, M.G.L. c. 100A.)**
- 6. A list of all authorized users who will have access to the Section 5 plates and a photocopy of a valid driver's license for each authorized user.**

Please complete the enclosed application and return it to this office. A return envelope is provided for your convenience. Your request will be referred for investigation and you will be notified of the result.

* If you do not have an FID/EIN, you can obtain one from the Internal Revenue Service at 1-800-829-4933.

Note: *The business name or corporation name must be spelled exactly the same on all of the above documents.*

NOTE: Compliance Decals: Except for a 'Dealer,' a general registration holder must have a 'Compliance Decal' affixed to each motor vehicle or trailer he or she owns (or leases) that is operated with the assigned General Registration Number Plate. The presence of the Compliance Decal indicates the sales tax (M.G.L. c. 64H) has been paid and that title (M.G.L. c.90D) has been obtained. You will be asked to provide tax and title documentation for each vehicle before any plates can be assigned.

Application For Repair Registration

REPAIR TYPE: (check all boxes that apply)
☐ General Auto ☐ Auto Body/Glass ☐ Tow
SECTION 1:**Primary Owner Information**
☐ Individual ☐ Corp./Co. Number of plates requested _____
MA License or ID number
FID Number
(Corp./Co. or Individual with a business name)

Name: _____
Last First MI -- DOB

Corp./Co. Name: _____

Address: _____
Street City ST Zip Code
Secondary Owner Information (if necessary)MA License or ID number
Name: _____
Last First MI -- DOB

Address: _____
Street City ST Zip Code
SECTION 2:**Business Information**

Name: _____

(If the Corp./Co. name is the same as in Section 1, write "same". If not, fill in the business name and attach a copy of the Business Certificate issued by your municipality. If you are an individual using a business name other than your own, you must supply a license number and an FID/EIN.)

Location: _____
Street City ST Zip Code

Mailing Address: _____
Street City ST Zip Code

(Complete if different than Business Location, if not write "same".)

Hours of Operation: _____

Tele. No. ()- Pager No. ()-

(You must be available for a site visit by the State Police.)

**** ALL INFORMATION IS REQUIRED UNLESS OTHERWISE NOTED ****

SECTION 3:

1. As an owner, do you currently have or have you ever had a Section 5 General Registration plate? ☐ YES ☐ NO
(e.g., Dealer, Repairer, Owner Contractor, Transporter, or Farmer.)
- 1a. If yes, complete the following information.
Plate: Type _____ Number _____ Status: ☐ Active ☐ Expired ☐ Canceled
- 1b. If yes, has the plate been suspended or revoked? ☐ YES ☐ NO
2. If the business is a corporation please list officers:
- _____ President
_____ Treasurer
_____ Clerk
3. Are you engaged in any of the following businesses:
- a. Repairing motor vehicles or trailers for the public? ☐ YES ☐ NO
b. Towing motor vehicles or trailers for the public? ☐ YES ☐ NO
c. Towing for the Police Department? (If yes, please include a copy of the DTE permit.) ☐ YES ☐ NO
4. State the complete address of any building or town yards used in conjunction with your business that are not located at your business address.
- | Street | City | ST | Zip code |
|--------|-------|-------|----------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
5. Please describe the type of construction (wood, brick, cinder block, etc.) and the size of the building used in conjunction with your business.
- _____

6. Do you have any signs posted that indicate that you are in the business of repairing, altering equipment, or towing motor vehicles or trailers for the public? ☐ YES ☐ NO
7. What are your posted hours of business? _____
8. Do you have a repair shop number issued by the Director, Division of Standards, Office of Consumer Affairs?
(If yes, please include a copy of the document.) ☐ YES ☐ NO
9. Are you aware of the provisions of M.G.L. c. 90D, s. 4 that states that all vehicles owned by you or your business must be titled? (If you are an individual with a DBA the title(s) must be in your name or the name of your business. If the business is a corporation, the title must be in the corporation name.) ☐ YES ☐ NO

The undersigned hereby certify that all information contained in this application is true and correct to the best of my (our) knowledge and belief.
(False statements are punishable by fine, imprisonment, or both.)

I hereby acknowledge that any Section 5 General Registration Plate issued by the Registrar remains the property of the RMV, that it is not transferable, and that it may not be sold, rented, leased, loaned, re-assigned or transferred in any other manner by me or any agent on my behalf. I further understand, acknowledge and agree that if any registration plate issued as a result of this application is found in the possession of a person or on a vehicle not authorized by law, regulation or RMV policy to possess or display such plate, it may be seized at the discretion of the Registrar or his agent or a law enforcement officer and that I may be summoned by the Registrar for enforcement action and possible loss of the General Registration and all General Registration plates.

Signature: _____ Title _____ Date: _____
Signature: _____ Title _____ Date: _____

(If a corporation, include the title of the officer or duly authorized agent. If a partnership, both partners must sign.)

Repair Application Checklist

The following is a list of documents and/or activities that must be completed prior to the State Police Inspection. Please submit the completed list with your application for Repair Plate. Once your application is approved, you will receive a letter of notice with a list of general requirements that need to be met prior to the State Police Inspection.

- ☐ You must be principally and substantially engaged in the business of repairing, altering, reconditioning, equipping or towing motor vehicles or trailers for the public. What is your line of business?

- ☐ Please submit with your application a copy of your Registration for Motor Vehicle Repair Shop Certificate, issued by The Division of Standards, Office of Consumer Affairs.

- ☐ Ensure that you have a permanently affixed exterior sign posted of sufficient size and design to give the general public notice of the name and nature of the business. What are the signs dimensions?

Height: _____ Length: _____ Width: _____ What does the sign say?

- ☐ Section Five registrants cannot share office space. You must have a separate and exclusive entrance to your place of business, unless they are both owned by you. Please submit a floor plan with your application.

- ☐ The building structure, or office trailer must have adequate office space to conduct business. Please include this information on your floor plan.

- ☐ If storing vehicles, adequate storage space is required. Please provide a description of your lot.

- ☐ Prior to the State Police Inspection, please check with your city or town Licensing Board for any additional requirements.

NOTE: Please keep copies of all submitted documents for the State Police Inspection. Additional requirements will be requested on the date of inspection. A new list of general requirements will be sent to you with a letter accepting your application.